

Chief Executive Officer Approval

FY 11 - 12 and FY 12 - 13 310 Board 2-Year Plan:

Name of 310 Board: **Mental Health/Mental Retardation Board of Bibb, Pickens, and Tuscaloosa Counties, Inc. dba Indian Rivers Mental Health Center**

County(s) Served: **Bibb, Pickens, and Tuscaloosa Counties**

Population(s) served: **Mental Illness, Intellectual Disabilities, and Substance Abuse**

Vision Statement: Indian Rivers Mental Health Center (IRMHC) will deliver a robust continuum of behavioral health services to the West Alabama community. It will consistently deliver revenue in excess of expenses. Indian Rivers will offer inpatient, outpatient, and residential care as core services for individuals with mental illness, substance abuse, and intellectual disabilities to a large customer base throughout Bibb, Pickens, and Tuscaloosa counties. Indian Rivers' service offerings will be accessible, consumer driven, efficient, technically advanced, and show a clear and obvious benefit to the community. Indian Rivers will continue to expand through organic growth and acquisitions in related market segments.

Mission Statement: To prevent and treat behavioral health disorders

With a mission of providing prevention and treatment services to people with behavioral health issues, Indian Rivers provides a full continuum of service to the community. Our focus is the provision of accessible service that promotes the recovery of each individual. We hold ourselves accountable to our consumers, their families and advocates, our payers, and to the community at large.

I. Plan Development:

A. Describe your established planning cycle.

The Board meets annually to review goals and assess needed changes and current services. The Board reviews the S.W.O.T. analysis and previous year accomplishments developed by the management team. Throughout the year the Board reviews financial and QI results, family and client survey results and key performance indicators. Local needs assessments from public meetings held in Bibb, Pickens, and Tuscaloosa counties were considered. Information compiled from the agency's involvement in the State Regional Acute Care and Bryce Extended Care Planning Process was also considered. Our agency also utilized information from the Local, Regional and State DMH planning process.

B. What are the roles of the key stakeholders?

We partner with our stakeholders to provide continual improvements in our service delivery system within our local community. We strive to continually improve our system of care by developing these local partnerships. Our key stakeholders provide input into the development of agency goals.

Clients, families, state and community agencies, state and local government officials, community coalitions, advocacy groups, West Alabama Regional Transit Authority, children's policy councils, judicial and correctional systems, healthcare systems, education teams and certification teams make up the stakeholders utilized by our Board during plan development.

C. How is the plan implementation monitored and evaluated?

Plan implementation is achieved through the use of the following resources which also allow us to monitor and implement needed changes:

- Quarterly QI reports to the Board
- Monthly fiscal operations review with the Board
- Quarterly review of key performance indicators
- Yearly client and family surveys
- Center wide suggestion boxes located in each office to receive input daily from clients/families/caregivers and staff are reviewed weekly by the management team
- Certification site visit results
- Advocacy monitoring reports
- Regularly scheduled program staff meetings
- Feedback from attendees of annual board meeting
- Monthly corporate compliance audits
- Community Mental Health Task Force
- Weekly management team meetings

II. Plan Components: FY 2011 to 2013

A. Populations

1. Describe the population(s) served.

Children, adolescents, and adults affected by mental illness; adults affected by intellectual disabilities and substance abuse disorders; and prevention and education services for at risk youth and their families.

2. Describe the demographics.

See Attachment A

B. Community Needs/Services Priorities

1. How do you assess needs?

Please see information included in the planning cycle and key roles of stakeholders as earlier stated in the plan. Examples include: Input received from clients, families, legal representatives, staff, advocates and certification teams. Feedback from attendees of the annual board meeting, requests and suggestions from community, legal and government agencies and community based assessments.

2. What are the greatest area(s) of unmet need(s)?

- Additional MI group homes / residential beds
- Transportation
- Mental Health Court
- Alternatives to Bryce
- SA Detox
- SA residential beds
- ID transportation
- ID crisis services

C. Services/Supports – Describe the services/supports provided and needed expansions.

Service/Supports Currently Provided by IRMHC:

*See **Attachment B** which contains the IRMHC Program Descriptions. Program Descriptions are also located in the IRMHC Policy and Procedure Manual.*

Needed Expansions: *The following list includes several of the needed expansions identified during Community Needs Assessment Meetings and the entire planning cycle:*

- Increased low income residential housing opportunities for our clients within the community
- Addition of 20 Medication – Observation – Meals apartments
- Increased community supports through case management
- Improved access for our clients
- Increased client input in outcome-focused plans of care
- Partnerships with other providers such as Maude Whatley or DCH

D. Resource Development & Allocation -- Describe current funding resources and future funding resources for planned expanded capacity (i.e. budget documents), if applicable.

1. Current Sources of Funding for IRMHC:

- DMH/ID/SA
- Medicaid/Medicare
- Private Pay
- Third Party Insurers
- City of Tuscaloosa
- City of Northport
- Tuscaloosa County Commission
- Pickens County Commission
- Bibb County Commission
- Alabama Department of Youth Services
- Tuscaloosa City Board of Education
- Bibb County Board of Education
- Contributions

2. Future Sources of Funding:

Same as Current Sources of Funding

Refer to Attachment C which is a copy of the IRMHC FY 08-09 Financial Audit

III. IRMHC 310 Board Goals/Objectives: FY 2011 - 2013

A. Increase Revenues

1. Build cash reserves
2. Diversify funding sources
3. Reduce days in receivables
4. Contract with Southern Pharmaceuticals to provide pharmacy services
5. Purchase of Breckenridge Apartments
6. Add 20 Medication-Observation-Meals apartments
7. Consolidate three Tuscaloosa county outpatient offices into one facility
8. Improve client satisfaction
9. Consistently monitor the attainment of productivity quotas for designated staff
10. Continue and improve partnerships with other community agencies to expand services and funding opportunities
11. Participate in Alabama Council benchmarking

B. Staff Retention

1. Improve Performance Appraisal System
2. Continue to improve salaries and benefits as funding permits
3. Survey employees regarding retention and supervision
4. Reduce staff turnover

C. Service Expansion

1. Add non-residential community supports
2. Implement clinical treatment teams
3. Add 20 Medication-Observation-Meals apartments
4. Expand Substance Abuse intensive outpatient services
5. Expand number of ID clients served due to the closing of Partlow

D. Improve and Promote Public Awareness of Agency

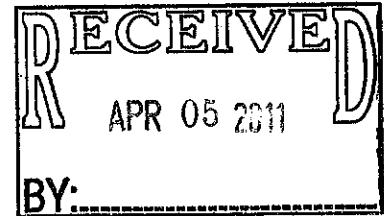
1. Grow partnerships with other healthcare providers
2. Active participation in the local Community Mental Health Task Force
3. Improve collaboration with Federally Qualified Health Centers (FQHC)
4. Increase utilization of community publications to increase public awareness and to promote the reduction of the inappropriate Mental Illness stigma within the community

Attachment A
Indian Rivers Mental Health Center
FY 2009 - 2010 Client Demographics

Age group	patient_sex_value	race_value	County				Grand Total	
			Bibb	Pickens	Tuscaloosa	Other		
Adult	Female	American Indian	5		6		11	
		Asian			2		2	
		Black/ African American	45	107	768	31	951	
		More Than One Race Reported	1		4		5	
		Native Hawaiian/ Other Pacific Islander			2		2	
		No Entry			2	2	4	
		Other	2	1	20	5	28	
		White/ Caucasian	208	107	1106	182	1603	
	Female Total		261	215	1910	220	2606	
	Male	American Indian			3		3	
		Asian			1		1	
		Black/ African American	65	105	623	21	814	
		More Than One Race Reported	2		2		4	
		Other	2	2	20		24	
		White/ Caucasian	160	78	669	45	952	
	Male Total		229	185	1318	66	1798	
	Unknown	Black/ African American			4		4	
		White/ Caucasian	2	3	10	2	17	
	Unknown Total		2	3	14	2	21	
	Adult Total			492	403	3242	288	4425
	Child	Female	Black/ African American	21	22	260	3	306
More Than One Race Reported			2	2	8	2	14	
Other				1	6	1	8	
White/ Caucasian			48	20	161	13	242	
Female Total		71	45	435	19	570		
Male		Black/ African American	47	39	456	5	547	
		More Than One Race Reported	2	1	18		21	
		Other	1	1	9		11	
		White/ Caucasian	63	32	180	12	287	
Male Total		113	73	663	17	866		
Unknown		Black/ African American			8		8	
		More Than One Race Reported			2		2	
		Other			1		1	
	White/ Caucasian	1		3		4		
Unknown Total		1		14		15		
Child Total			185	118	1112	36	1451	
Grand Total			677	521	4354	324	5876	

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Indian Rivers Mental Health Center



Intellectual Disabilities (ID) Residential Services:

Indian Rivers has 15 community living homes throughout Bibb, Pickens, and Tuscaloosa counties which individuals with an intellectual disability call home. Supports are provided to help keep an independent lifestyle; whether it is in a single person unit, an apartment with as little as one hour a day support or a home in which staff is available 24 hours a day. These facilities offer a well rounded leisure/recreation program, good health care, well-balanced meals, personal care, medication management, assistance with laundry and household chores, and effective transportation.

ID Day Programs:

With locations in three counties, our day programs generate new interests, develop individual skills, and promote community awareness through a fun and enriching environment. Individuals gain new perspectives and participate in fulfilling activities such as cooking, nutrition, and exercise.

ID Supported Employment:

Provides assistance to individuals with an intellectual disability who are looking for the right career path. Pre-employment and on-the-job training is provided to assist individuals in identifying their strengths as well as training to help in developing the critical teamwork skills that employers actively seek. Supports are also available to help the individual locate and maintain the job that best fits their interest and skill level.

Adult Outpatient Program (AOP):

The Adult Outpatient Program serves individuals age 18 or older that have been diagnosed with a serious mental illness (SMI). Therapists offer individual therapy, crisis intervention, mental health consultation and group therapy. Groups offered on a regular basis help clients deal with issues such as depression, abuse, impact of substance abuse on their mental illness and treatment compliance.

Adult Outpatient Clinic:

The Adult Outpatient (AOP) Clinic offers medical assessment and treatment for patients who require medications to treat their mental illness. This includes admission assessments for new clients, routine monitoring for established clients and crisis evaluations as indicated. Nurses in the clinic see all scheduled patients for a brief monitoring of their response to medications and evaluation of their physical status to ensure no adverse effects occur from their medication.

Children and Family Services:

Children and Family Services treat clients under the age of 18 who have a mental illness, severe emotional disturbance, or behavior disorder symptoms. They are referred by their parent/guardian, school, Department of Human Resources, Juvenile Court, hospital, private practitioner, and other agencies in the area. Services include: individual and family therapy; diagnostic/evaluation services; psychiatric consultation/evaluation; medication monitoring, school based groups; basic living skills; family support services; crisis response services; group therapy; case management services; and intensive in-home services. Services are available on

site in designated schools, and at other designated sites as needed for clients whose treatment includes improving social and communication skills, improving the ability to identify and express feelings, reducing/managing symptoms of their diagnoses and related behavioral problems, improving anger management skills, and improving coping skills among other identified needs.

ACT Team:

The Indian Rivers' ACT Team serves 36 patients in the community who have been identified as frequent users of inpatient psychiatric services. Most of these patients have a history of multiple admissions to Bryce Hospital and non-compliance with treatment in the community. ACT Team staff members have contact with all 36 patients on a regular basis and provide services in the community to ensure compliance and early intervention. These services range from medication administration to helping patients access services in the community.

MI Residential Care:

The Indian Rivers' MI residential program is for those mentally ill clients who have been discharged from a state mental institution. The residential sites include crisis and intermediate care, group homes, supervised apartments and a variety of independent residences. The goal in these programs is for clients to acquire new skills and advance to greater levels of independence. Staff members also coordinate consumer interaction with community agencies.

Foster Care:

IRMHC has contracted with individuals throughout Tuscaloosa and Pickens counties to provide placement for our mentally ill clients who have been released into the community but are unable to live independently. They are the individuals who are less capable of participating in active programs as is required in our group homes. These individuals receive 24 hour supervision from the foster home operators who coach them on day-to-day living skills. The homes are visited frequently by the RN and case manager who monitor for medication and treatment compliance. They ensure that clients get to medical as well as psychiatric appointments. Foster home operators meet with IRMHC staff monthly to receive training on the most effective strategies for working with our clients.

Bridge Team:

The Bridge Team works with individuals in the community who are in crisis, in danger of inpatient hospitalization, re-hospitalization, or have recently been discharged from a state hospital. The length of stay for those individuals receiving Bridge Team services is typically 60 days. This length of stay is dependent on how well the individual acclimates back in to the community and/or how well mental health symptoms are managed through psychiatric, therapeutic, and case management services.

Crisis Response Team (CRT):

Clients can receive assistance from staff after regular business hours and on weekends by calling the Crisis line. The Crisis line connects them to an answering service which will contact the therapist on-call. The therapist will talk the client through the crisis and make recommendations such as going to the emergency room or seeing their therapist the next morning. At times, the

therapist on-call will contact other agencies (e.g. police, ambulance service) if necessary to intervene in a true crisis situation.

Adult Case Management:

Case managers provide intensive case management services to our severely mentally ill adult clients. When patients are referred, a case manager assesses their current needs and a plan of care is developed to address those needs. They are assisted with basic living skills, medication acquisition, housing issues, and connection with community agencies. The goal for case management is to advocate for the client and assist each client to maximize community resources and services so that they can maintain their outpatient status.

Supported Employment:

The Supported Employment Program matches clients with appropriate jobs based on the expressed interests and abilities of the clients. This is determined by a skills assessment and participation in the work adjustment groups. Job development is done by contacting local businesses and educating them about the program, including the benefits to their agency. Work adjustment groups are held once a week with emphasis on interviewing skills; training on completing applications; and appropriate job behaviors. A job coach provides on-the-job training and support as long as needed. Other services of the program include basic living skills training; transportation; and case management for those clients in employment status in order to promote ongoing success. Referrals are received from Indian Rivers' therapists and Vocational Rehabilitation Services.

Bibb and Pickens MI Satellite Offices:

Satellite offices in Bibb and Pickens Counties offer a variety of outpatient services for both adults and children. Services include admission assessments for new clients, individual therapy, group therapy, family therapy, basic living skills groups, case management and medical services. Psychiatrists and nurses from our Tuscaloosa sites are scheduled to provide medical services in the counties 2-3 days each month.

Substance Abuse Services Intensive Outpatient Program:

The Intensive Outpatient Program provides substance abuse treatment services to consumers in Bibb, Pickens and Tuscaloosa counties. During this program participants will receive group and individual counseling, case management and family education to introduce sobriety as an option for a way of life and begin recovery from the disease of addiction. This program also provides recovery education for those clients that do not require treatment. Day and evening Intensive Outpatient groups provide flexibility for scheduling. Our services are centrally located and accessible in all of our counties.

Women's Services Program:

The Women's Services Program is designed to facilitate the most effective treatment for substance-dependent, pregnant women and those with dependent children. It operates on the proven premise that treating women is the most effective form of treatment for substance-abusing women. The Women's Services Intensive Outpatient Program operates as a mini day treatment program. We recognize the barriers that women have to entering and completing treatment, and have designed this program to be responsive to these barriers. Our

program provides those wrap-around and ancillary services needed to break down these barriers and to help treat and educate the entire family and the community. Services provided include group and individual counseling, case management, family education, domestic violence and parenting groups.

A Woman's Place:

A Woman's Place (AWP) is a short-term crisis residential substance abuse program for substance-dependent women. AWP is a unique program in the state of Alabama in that it offers all services in a home-like environment.

Prevention:

Substance abuse prevention services are offered through our contracted program at the Aliceville Housing Authority in Pickens County. Programs are presented in a way that is both educational and fun. Presentations focus on not only substance abuse prevention, but also place an emphasis on preventing violence, life skills, HIV/AIDS education, and other relevant topics that strengthen the participants and the community.

For complete program descriptions, refer to the IRMHC Scope of Services located in the IRMHC Policies and Procedures Manual.